

APPLICATION FOR CAREER AND TECHNICAL EDUCATION LICENSE

Technology and Engineering Education

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|--|------------|-----------------------|-------|-----------------------|
| Last Name | First Name | Middle Name | Date | SS # or CACTUS ID # |
| Home Address | | City | State | Zip |
| E-mail Address | | Work Phone () | | Home Phone () |
| I am teaching at _____ (School) _____ (District) <input type="checkbox"/> Not Teaching Check your current Educator License area: <input type="checkbox"/> Secondary Education <input type="checkbox"/> Career and Technical <input type="checkbox"/> CTE/APP <input type="checkbox"/> No License Area | | | | |

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| Technology and Engineering Endorsement For Which You Are Applying: <input type="checkbox"/> Technology Education (CTE General) |
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Employment Record (Related to the endorsement area(s) for which you are applying – *(Exclude teaching experience)*)

| From | | To | | Total Months | Company Name & Address | Position & Title | Immediate Supervisor (Name & Title) | Reason for Leaving | Verification Attached |
|------|----|----|----|--------------|------------------------|------------------|--|--------------------|---|
| Mo | Yr | Mo | Yr | | | | | | |
| | | | | | | | | | <input type="checkbox"/> Yes <input type="checkbox"/> No |

| |
|------------------------------------|
| Explain Duties & Responsibilities: |
|------------------------------------|

| From | | To | | Total Months | Company Name & Address | Position & Title | Immediate Supervisor (Name & Title) | Reason for Leaving | Verification Attached |
|------|----|----|----|--------------|------------------------|------------------|--|--------------------|---|
| Mo | Yr | Mo | Yr | | | | | | |
| | | | | | | | | | <input type="checkbox"/> Yes <input type="checkbox"/> No |

| |
|------------------------------------|
| Explain Duties & Responsibilities: |
|------------------------------------|

| From | | To | | Total Months | Company Name & Address | Position & Title | Immediate Supervisor (Name & Title) | Reason for Leaving | Verification Attached |
|------|----|----|----|--------------|------------------------|------------------|--|--------------------|---|
| Mo | Yr | Mo | Yr | | | | | | |
| | | | | | | | | | <input type="checkbox"/> Yes <input type="checkbox"/> No |

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|------------------------------------|
| Explain Duties & Responsibilities: |
|------------------------------------|

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| Number of years experience in occupations related to the endorsement area: | | Employer evidence letters verifying your work expertise and experience <u>must</u> be submitted with this application. |
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Education

If additional space is needed, please attach a separate sheet of paper. Transcripts must be attached to verify degree and/or applicable endorsement coursework.

| Name of School | From | | To | | Graduation Year | Degree | Major/Minor/Composite |
|----------------|------|----|----|----|-----------------|--------|-----------------------|
| | Mo | Yr | Mo | Yr | | | |
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Technology and Engineering Background Requirements

| Credits | | University/College Name and Course Titles |
|---------|--|---|
| 3 | Communications technology course | |
| 3 | Construction technology course | |
| 3 | Energy power and transportation technology course | |
| 3 | Manufacturing technology course | |
| 2-3 | Facility - equipment maintenance and repair course | |
| 3 | Engineering systems course | |
| 6 | Computer aided drafting course | |
| 6 | Electronics course | |
| 6 | Materials and processes course | |
| 6 | Technology & engineering related depth course | |

References (Teaching and/or Employment)

| Name | Address | Position | Phone |
|------|---------|----------|-------|
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| Applicant Signature | X | Date | |
|----------------------------|----------|-------------|--|

----- **Information below to be completed by USOE personnel** -----

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| License Recommended: | <input type="checkbox"/> Level 1 CTE/APP | <input type="checkbox"/> Level 1 CTE | <input type="checkbox"/> Level 2 CTE |
| Approved Endorsement: | Technology and Engineering Education (CTE General) | | |
| Signature of State Technology and Engineering Education Specialist: | | | |
| Signature | | Date | |
| Submit completed application, official transcripts, and/or other documentation to: Stephanie Ferris , USOE Educator Quality and Licensing, 250 East 500 South, PO Box 144200, Salt Lake City, UT 84114-4200, Phone: (801) 538-7752 | | Licensure Clearance | |